

Non-Guardian Access Form

This form is used to authorize someone who is not a legal guardian of a child (such as a step parent) to have access to your child's educational records or authorize as a pick up person and/or emergency contact. Per Minnesota State Law, only one parent/guardian needs to approve this and submit the form.

I am authorizing the person(s) listed below to have the rights designated below in regards to the student(s) named below:

Student(s):

Student Last Name (legal):	Student First Name (legal):	Birthdate:

I am authorizing the designated rights to the following person(s):

Last Name (le	(legal): First Name		ne (legal):		Providing Rights to:	
				 Emergency contact (if parent can't be reached) Access to child's educational records Authorization to pick up child Authorization to make changes to child's transportation arrangements 		
Birthdate:		Relationship to		o Student:		
Phone:			Email:			
Last Name (legal): First Nam		e (legal):	egal): Providing Rights to:		Rights to:	
					□ Access to chi □ Authorizatio	ontact (if parent can't be reached) ld's educational records n to pick up child n to make changes to child's arrangements
Birthdate:			Relationship to Student:			
Phone:			Email:			

I, ______, proclaim that I am the legal guardian of the student(s) listed above and am authorizing the rights listed above for the above named person(s) from the date on this form until I rescind access by providing written notification to the district.

Sign and Date:

Legal Guardian Signature:	Date:

A completed form can be submitted by dropping it off at any of our school offices, or submitting via email to <u>enrollments@biglakeschools.org</u> or via mail to: Big Lake Schools / District Office 501 Minnesota Ave Big Lake, MN 55309